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EXAMINER
MORGAN, ROBERT W

ART UNIT	PAPER NUMBER
2166	6

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Please find below and/or attached an Office communication concerning this application or proceeding.

PTO-90C (Rev. 07-01)

	Application No.		**Applicant(s)**
Office Action Summary	09/470,344		KERPELMAN ET AL.
	Examiner		**Art Unit**
	Robert W. Morgan		2166

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE <u>3</u> MONTH(S) FROM
THE MAILING DATE OF THIS COMMUNICATION.
- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed
  after SIX (6) MONTHS from the mailing date of this communication.
- If the period for reply specified above is less than thirty (30) days, a reply within the statutory minimum of thirty (30) days will be considered timely.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133).
- Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any
  earned patent term adjustment. See 37 CFR 1.704(b).

Status

1)☐ Responsive to communication(s) filed on _____ .

2a)☐ This action is **FINAL.**   2b)☒ This action is non-final.

3)☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is
closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

4)☒ Claim(s) *1-60* is/are pending in the application.

    4a) Of the above claim(s) _____ is/are withdrawn from consideration.

5)☐ Claim(s) _____ is/are allowed.

6)☒ Claim(s) *1-60* is/are rejected.

7)☐ Claim(s) _____ is/are objected to.

8)☐ Claim(s) _____ are subject to restriction and/or election requirement. .

Application Papers

9)☐ The specification is objected to by the Examiner.

10)☐ The drawing(s) filed on _____ is/are: a)☐ accepted or b)☐ objected to by the Examiner.

    Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).

11)☐ The proposed drawing correction filed on _____ is: a)☐ approved b)☐ disapproved by the Examiner.

    If approved, corrected drawings are required in reply to this Office action.

12)☐ The oath or declaration is objected to by the Examiner.

Priority under 35 U.S.C. §§ 119 and 120

13)☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).

    a)☐ All b)☐ Some * c)☐ None of:

      1.☐ Certified copies of the priority documents have been received.

      2.☐ Certified copies of the priority documents have been received in Application No. _____ .

      3.☐ Copies of the certified copies of the priority documents have been received in this National Stage
application from the International Bureau (PCT Rule 17.2(a)).

    * See the attached detailed Office action for a list of the certified copies not received.

14)☐ Acknowledgment is made of a claim for domestic priority under 35 U.S.C. § 119(e) (to a provisional application).

    a) ☐ The translation of the foreign language provisional application has been received.

15)☐ Acknowledgment is made of a claim for domestic priority under 35 U.S.C. §§ 120 and/or 121.

Attachment(s)

1) ☒ Notice of References Cited (PTO-892)   4) ☐ Interview Summary (PTO-413) Paper No(s). _____ .
2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)   5) ☐ Notice of Informal Patent Application (PTO-152)
3) ☐ Information Disclosure Statement(s) (PTO-1449) Paper No(s) _____ .   6) ☐ Other: .

DETAILED ACTION

Claim Rejections - 35 USC § 103

The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all

obviousness rejections set forth in this Office action:

> (a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the manner in which the invention was made.

Claims 1-60 are rejected under 35 U.S.C. 103(a) as being unpatentable over U.S. Patent

No. 6,260,021 to Wong et al.

As per claim 1, Wong et al. teaches a medical facility data communications system, the

system comprising:

--the claimed internal data communications network is met by the use of the Intranet (36,

Fig. 1) (see: column 8, lines 53-61);

--the claimed plurality of clients coupled to the internal network and uniquely addressed

on the internal network is met by the use of client system such as computer workstations (36,

Fig. 1) connected via the Intranet (36, Fig. 1) and this suggests while using the Intranet that all

addresses are unique (see: column 8, lines 53-64).

Wong et al. teaches a medical image distributing system that uses a medical image server

(12, Fig. 1) and a plurality of network-attached client workstations for receiving and transferring

medical images and this suggests while using the network (Intranet) that all addresses are unique

(see: column 3, lines 61 to column 4, lines 15).

Wong et al. fails to explicitly teach the claimed data communications control system

coupled to the internal network for receiving client data from the clients, transmitting client data

to a remote service provider, receiving addressed data from the remote service provider, and

distributing the addressed data to the clients.

It is well known in the computer medical industry that the Internet with a data

communication control system, including Domain Name Systems and Domain Name Systems

servers, both have domain name addresses and IP addresses that receives and transfers

information as requested by the user through a remote service provider. Therefore, it would have

obvious to a person having ordinary skill in the art at the time of the invention to include a data

communication control system using a remote service provider within the medical image

distribution of system as taught by Wong et al. with the motivation of assisting the users in

uniquely identifying specific addressing information, thereby providing a simpler and quicker

way to access desired data over a network.

As per claims 2-3, Wong et al. teaches the use of internal network such as the Intranet

(LAN) (36, Fig. 1) (see: column 8, lines 53-61).

As per claim 4, Wong et al. teaches the claimed clients include at least one medical

imaging system configured to produce image data (see: column 3, lines 31-35).

As per claim 5, Wong et al. teaches the claimed at least one imaging system is selected

from a group including medical resonance imaging system, computed tomography systems,

ultrasound systems, and x-ray systems (see: column 1, lines 21-27).

As per claims 6-8, Wong et al. teaches the claimed clients include a hospital information

system, radiology department and picture archiving and communication system (see: column 1,

lines 21-27, 52-59 and 65 to column 2, lines 14 and Fig. 1).

As per claims 9-10, Wong et al. teaches image distribution system configured to access from network clients in accordance with predetermined data acquisition request and the data accessed includes operational parameters of the clients (see: column 2, lines 38-51).

As per claims 11-12, Wong et al. teaches a medical image distributing system that uses a medical image server (12, Fig. 1) and a plurality of network-attached client workstations for receiving and transferring medical images (see: column 3, lines 61 to column 4, lines 15 and Fig. 1).

Wong et al fails to teach the use of the at least one mobile client connected to the internal network to access data.

It is well known in computer medical industry that using a portable computer allows a user access to the Internet. Therefore, it would have been obvious to one having ordinary skill in the art at the time invention was made to either use a portable computer or a hard wired computer within the medical image distribution of system as taught by Wong et al. with the motivation of allowing the user unlimited opportunities to access and retrieve information on the Internet, thereby facilitating the approach of gathering information through over a network in a less time consuming and efficient manner.

As per claim 13, Wong et al. teaches the claimed data communications control system includes an operator interface, and wherein the system is configured to access data from networked clients in response to an operator request input via the operator interface (see: column 3, lines 61 to column 4, lines 14).

As per claim 14, Wong et al. teaches the claimed external network interface for exchanging client data and addressed data between the data communications control system and

the remote service provider (see: column 3, lines 61 to column 4, lines 15 and column 8, lines

53-64).

As per claim 15, Wong et al. teaches the claimed external network interface includes an

interface for at least two different data communications media (see: column 3, lines 61 to column

4, lines 15).

As per claim 16, Wong et al. teaches communication between the medical image server

(12, Fig. 1) and a plurality of network-attached client workstations for receiving and transferring

medical images (see: column 3, lines 61 to column 4, lines 15).

Wong et al. fails to teach the claimed data communications between selected clients and

the remote service provider are routed through the data communications control system.

It is well known in the computer medical industry that communication between a client

computer and a remote service provider using a data communication control system is essential

to receive and transfer information requested by the user. Therefore, it would have obvious to a

person having ordinary skill in the art at the time of the invention to include a data

communication control system using a remote service provider within the medical image

distribution of system as taught by Wong et al. with the motivation of assisting the users in

accessing and retrieving information on the Internet, thereby facilitating the approach of

gathering information through over a network in a more effective and effective manner.

As per claim 17, Wong et al. teaches a data communications system for a medical

diagnostic facility, the system comprising:

--the claimed plurality of clients linked to an internal network, the clients including a

medical diagnostic imaging system is met by the use of client system such as computer

workstations (36, Fig. 1) connected to the medical server (12, Fig. 1) via the Intranet (36, Fig. 1)

(see: column 8, lines 53-64);

Wong et al. fails to teach:

--the claimed data communications control system linked to the internal network for

receiving client data from the clients, distributing addressed data to the clients, transmitting

client data to a remote service provider and receiving addressed data from the remote service

provider; and

--the claimed external network interface coupled to the data communications control

system for transmitting the client data to the remote service provider and for receiving the

addressed data from the remote service provider.

It is well known in the computer medical industry that the Internet with a data

communication control system, including Domain Name Systems and Domain Name Systems

servers, both have domain name addresses and IP addresses that receives and transfers

information as requested by the user through a remote service provider. Therefore, it would have

obvious to a person having ordinary skill in the art at the time of the invention to include a data

communication control system using a remote service provider within the medical image

distribution of system as taught by Wong et al. with the motivation of assisting the users in

uniquely identifying specific addressing information, thereby providing a simpler and quicker

way to access desired data over a network.

As per claim 18, Wong et al. teaches the claimed client data includes operational data for

evaluating performance of the medical diagnostic imaging system (see: column 3, lines 31-36).

As per claims 19-21, Wong et al. teaches the claimed internal network is a local area network such as the Ethernet and the external network is a wide area network that includes the Internet. The Internet (WAN) (36, Fig. 1) and Intranet (LAN) (36, Fig. 1) meet this limitation.

As per claims 22-24, Wong et al. teaches the claimed clients include a hospital information system, radiology department and picture archiving and communication system (see: column 1, lines 21-27, 52-59 and 65 to column 2, lines 14 and Fig. 1).

As per claims 25-26, Wong et al. teaches a image distribution system configured to access data from networked clients in accordance with a predetermined data acquisition routine and the data accessed includes operational parameters of the clients (see: column 2, lines 38-51).

As per claim 27-28, Wong et al. teaches a medical image distributing system that uses a medical image server (12, Fig. 1) and a plurality of network-attached client workstations for receiving and transferring medical images (see: column 3, lines 61 to column 4, lines 15 and Fig. 1).

Wong et al. fails to teach the use of the at least one mobile client connected to the internal network to access data.

It is well known in computer medical industry that using a portable computer allows access the Internet. Therefore, it would have been obvious to one having ordinary skill in the art at the time invention was made to either use a portable computer or a hard wired computer within the medical image distribution of system as taught by Wong et al. with the motivation of assisting the users with accessing and retrieving information on the Internet, thereby facilitating the approach of gathering information through over a network in a less time consuming and efficient manner.

As per claim 29, Wong et al. teaches the claimed data communications control system includes an operator interface, and wherein the system is configured to access data from networked clients in response to an operator request input via the operator interface (see: column 3, lines 61 to column 4, lines 14).

As per claims 30-31, Wong et al. teaches the claimed data communications control system is configured to store and execute communications interface routines interactively with the clients and the communications interface routines include a web browser routine (see: column 3, lines 42-52 and column 3, lines 61 to column 4, lines 15).

As per claim 32, Wong et al. teaches a communications system for a medical diagnostic facility, the system comprising:

--the claimed internal network is met by Intranet (36, Fig. 1);

--the claimed plurality of clients configured for connection to the network for transmission of client data. This feature is met by the medical image distributing system that uses a medical image server (12, Fig. 1) and a plurality of network-attached client workstations for receiving and transferring medical images (see: column 3, lines 61 to column 4, lines 15).

Wong et al. fails to explicitly teach the clients including a physically mobile client as well as the data communications control system being configured to automatically access client data including data indicative of a location of the mobile client and data communication control system coupled to the internal network and to an external network for communicating client data and addressed data between the clients and a remote service provider.

Since, Wong et al. teaches the use of the Intranet and Internet (36, Fig. 1) to access and communication data using hard wired computer (38, Fig. 1). It would have been obvious to a

person having ordinary skill in the art to include the use of a portable computer and the location

of portable computer as well as the IP address request by the users from the service provider over

the network within the medical image distribution of system as taught by Wong et al. with the

motivation of assisting the users with accessing and retrieving information on the Internet,

thereby facilitating the approach of gathering information through over a network in a less time

consuming and efficient manner.

As per claim 33, Wong et al. teaches a medical image distributing system that uses a

medical image server (12, Fig. 1) and a plurality of network-attached client workstations for

receiving and transferring medical images (see: column 3, lines 61 to column 4, lines 15 and Fig.

1).

Wong et al. fails to teach the claimed control system is configured to detect the location

of the mobile client upon connection of the mobile client to the network.

It is well known in the computer medical industry that the Internet with a data

communication control system, including Domain Name Systems and Domain Name Systems

servers, both have domain name addresses and IP addresses that receives and transfers

information as requested by the user through a remote service provider. Therefore, it would have

obvious to a person having ordinary skill in the art at the time of the invention to include a data

communication control system using a remote service provider within the medical image

distribution of system as taught by Wong et al. with the motivation of assisting the users in

uniquely identifying specific addressing information, thereby providing a simpler and quicker

way to access desired data over a network.

As per claim 34, Wong et al. teaches clients include a medical diagnostic imaging system, and wherein the client data includes operational data for evaluating performance of the medical diagnostic imaging system (see: column 3, lines 31-36).

As per claims 35-37, Wong et al. teaches the claimed internal network is a local area network such as the Ethernet and the external network is a wide area network that includes the Internet. The Internet (WAN) (36, Fig. 1) and Intranet (LAN) (36, Fig. 1) meet this limitation.

As per claims 38-40, Wong et al. teaches the claimed clients include a hospital information system, radiology department and picture archiving and communication system (see: column 1, lines 21-27, 52-59 and 65 to column 2, lines 14 and Fig. 1).

As per claims 41-42, Wong et al. teaches a image distribution system configured to access data from networked clients in accordance with a predetermined data acquisition routine and the data accessed includes operational parameters of the clients (see: column 2, lines 38-51).

As per claim 43, Wong et al. teaches the claimed data communications control system includes an operator interface, and wherein the system is configured to access data from networked clients in response to an operator request input via the operator interface (see: column 3, lines 61 to column 4, lines 14).

As per claims 44-45, Wong et al. teaches the claimed data communications control system is configured to store and execute communications interface routines interactively with the clients and the communications interface routines include a web browser routine (see: column 3, lines 42-52 and column 3, lines 61 to column 4, lines 15).

As per claim 46, Wong et al. teaches the transmitting and processing of medical reports requested with medical image data from a network-attached (Internet or Internet) to client workstations (see: column 3, lines 61 to column 4, lines 29 and column 3, lines 31-36).

Wong et al. fails to teach the claimed processing and transmitting at least a portion of the client data from the data communications control system to a remote service provider via an external network.

It is well known in the computer medical industry that the Internet with a data communication control system, including Domain Name Systems and Domain Name Systems servers, both have domain name addresses and IP addresses that receives and transfers information as requested by the user through a remote service provider. Therefore, it would have obvious to a person having ordinary skill in the art at the time of the invention to include a data communication control system using a remote service provider within the medical image distribution of system as taught by Wong et al. with the motivation of assisting the users in uniquely identifying specific addressing information, thereby providing a simpler and quicker way to access desired data over a network.

As per claim 47, Wong et al. teaches a medical image distributing system that uses a medical image server (12, Fig. 1) and a plurality of network-attached client workstations for receiving and transferring medical images (see: column 3, lines 61 to column 4, lines 15).

Wong et al. fails to teach the claimed steps of receiving addressed data from the remote service provider via the data communications control system, and distributing the addressed data to an intended client via the internal network.

The obviousness of incorporating such a feature within the system of Wong et al. is as discussed in claim rejection of claim 47, and incorporated herein.

As per claim 48, Wong et al. teaches the transmitting and processing of medical reports requested with medical image data from a network-attached (Internet or Internet) to client workstations (see: column 3, lines 61 to column 4, lines 29 and column 3, lines 31-36).

Wong fails to explicitly teach the claimed client data is transmitted to the data communications control system in response to a request from the control system.

It is well known in the computer medical industry that communication between a client computers and a remote service provider using a data communication control system is essential to receive and transfer information requested by the user. Therefore, it would have obvious to a person having ordinary skill in the art at the time of the invention to include a data communication control system using a remote service provider within the medical image distribution of system as taught by Wong et al. with the motivation of assisting the users in accessing and retrieving information on the Internet, thereby facilitating the approach of gathering information through over a network in a more effective and effective manner.

As per claim 49, Wong et al. teaches the claimed control system includes an operator interface, and wherein the request is generated via the operator interface (see: column 3, lines 61 to column 4, lines 15).

As per claim 50, Wong et al. teaches the claimed client data is transmitted to the control system in a transmission created by operator intervention at the client (see: column 3, lines 61 to column 4, lines 15).

As per claims 51-53, Wong et al. teaches the claimed transmission is created via an interface routine executed interactively by the control system and client, interface routine includes a web browser application and the step of storing client data for access by the control system (see: column 3, lines 42-52 and column 3, lines 61 to column 4, lines 15).

As per claim 54, Wong et al. teaches the claimed the step of logging communications between the clients and the control system (see: column 10, lines 28-47).

As per claim 55, Wong et al. teaches a medical image distributing system that uses a . medical image server (12, Fig. 1) and a plurality of network-attached client workstations for receiving, transferring and storing medical image data (see: column 3, lines 61 to column 4, lines 15).

Wong et al. fails teach the claimed the clients including at least one physically mobile client and transmitting client data from the clients to a data communications control system, the client data including at least data indicative of a location of the at least one mobile client.

Since, Wong et al. teaches the use of the Intranet and Internet (36, Fig. 1) to access and communication data using hard wired computer (38, Fig. 1). It would have been obvious to a person having ordinary skill in the art to include the use of a portable computer and the location of portable computer as well as the address of the users within the medical image distribution of system as taught by Wong et al. with the motivation of assisting the users with accessing and retrieving information on the Internet, thereby facilitating the approach of gathering information through over a network in a less time consuming and efficient manner.

As per claims 56-57, Wong et al. teaches a medical image distributing system that uses a medical image server (12, Fig. 1) and a plurality of network-attached client workstations for

receiving and transferring medical images (see: column 3, lines 61 to column 4, lines 15 and Fig.
1).

Wong et al. fails to teach at least one mobile client is transmitted upon connection of the
at least one mobile client to the network and the step of accessing client data representative of
performance of the clients.

It is well known in computer medical industry that a portable computer can access,
transmit and receive information while logged on the Internet. Therefore, it would have been
obvious to one having ordinary skill in the art at the time invention was made to use a portable
computer to receive and transmit information over a network within the medical image
distribution of system as taught by Wong et al. with the motivation of assisting the users with
accessing and retrieving information on the Internet, thereby facilitating the approach of
gathering information through over a network in a less time consuming and efficient manner.

As per claim 58, this feature has addressed in the rejection of claim 29, and is
incorporated herein.

As per claim 59, Wong teaches the claimed step of transmitting at least a portion of the
client data to a remote service provider via an external network. This feature is met by the
medical image distributing system that uses a medical image server (12, Fig. 1) and a plurality of
network-attached (Intranet/Internet) client workstations for receiving and transferring medical
images (see: column 3, lines 61 to column 4, lines 15 and Fig. 1).

As per claim 60, Wong et al. teaches a medical image distributing system that uses a
medical image server (12, Fig. 1) and a plurality of network-attached client workstations for

receiving, transferring and storing medical image data (see: column 3, lines 61 to column 4, lines 15).

Wong et al. fails to teach the claimed steps of receiving addressed data at the control system via an external network, and distributing the addressed data to an intended client.

It is well known in the computer medical industry that the Internet with a data communication control system, including Domain Name Systems and Domain Name Systems servers, both have domain name addresses and IP addresses that receives and transfers information as requested by the user through a remote service provider. Therefore, it would have obvious to a person having ordinary skill in the art at the time of the invention to include a data communication control system using a remote service provider within the medical image distribution of system as taught by Wong et al. with the motivation of assisting the users in uniquely identifying specific addressing information, thereby providing a simpler and quicker way to access desired data over a network.

Conclusion

The prior art made of record and not relied upon is considered pertinent to applicant's disclosure.

In related art (5,586,262) Komatsu et al. discloses an imaging system in a hospital with picture memory in which medical picture data of patient are stored.

In related art (6,006,191) DiRienzo provides a system for transmitting, storing, retransmitting and receiving electronic medical images.

In related art (Medical imaging a slow operation: Majority of health-care filed still grappling over basic technology issues) Picarille discuss hospital using high-tech imaging

technology such as radiology images, patient records and hospital administrative data available over a network.

In related art (5,867,821) Ballantyne et al. teaches a method and apparatus used for distribution and administration of medical services and electronic medical records to a patient's individual electronic patient care station.

In related art (From PACS to the World Wide Web) Ratib discloses new imaging techniques and the increasing proportion of medical imaging modalities that generate images in digital form with the development of digital image management.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to Robert W. Morgan whose telephone number is 703-605-4441. The examiner can normally be reached on 8:30 a.m. - 5:00 p.m. Mon - Fri.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Joseph Thomas can be reached on 703-305-9588. The fax phone numbers for the organization where this application or proceeding is assigned are 703-746-7239 for regular communications and 703-746-7238 for After Final communications.

Any inquiry of a general nature or relating to the status of this application or proceeding should be directed to the receptionist whose telephone number is 703-305-3900.

RWM
rwm
February 25, 2002

JOSEPH THOMAS
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